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UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF PENNSYLVANIA
PHILADELPHIA DIVISION

IN RE: **Vasos Inc.**

Case No.

Chapter **11**

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security]
Pennsylvania Dept. of Labor & Industry Offices of UC Tax Services 651 Boas Street Harrisburg, PA 17121		Account balance		\$0.00
PA Department of Revenue Bureau of Individual Taxes P.O. Box 280509 Harrisburg, PA 17128-0509		Taxes		\$0.00
Office of Unemployment of Compensation Labor & Industry Building P.O. Box 68568 Harrisburg, PA 17106-8568		Taxes		\$0.00
Internal Revenue Service P.O. Box 8208 Philadelphia, PA 19101-8208		Account balance		\$0.00
Dionte Wade City of Philadelphia P.O. Box 8040 Philadelphia, PA 19105		Account balance		\$0.00
City of Philadelphia Law Department/Major Tax Unit 1401 John F. Kennedy Boulevard 4th Floor Philadelphia, PA 19102		Account balance		\$0.00

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(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security]
City of Philadelphia Department of Revenue P.O. Box 8040 Philadelphia, PA 19105		Account balance		\$0.00
Bureau of Imaging and Document MGMT. P.O. Box 280407 Harrisburg, PA 17128-0407		Taxes		\$0.00
Bureau of Corporation Taxes P.O. Box 280427 Harrisburg, PA 17128-0427		Taxes		\$0.00
Bureau of Compliance Business Clearance Section Department 280947 Harrisburg, Pa. 17128-0947		Taxes		\$0.00
Bureau of Business Trust Fund Taxes P.O. Box 280904 Harrisburg, PA 17128-0904		Taxes		\$0.00
Bureau of Business Trust Fund Taxes P.O. Box 280905 Harrisburg, PA 17128-0905		Taxes		\$0.00
Alliance One 4850 Street Road Suite 300 Trevose, PA 19053		Account balance		\$0.00

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Continuation Sheet No. 2

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the President of the Corporation
named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: 4/16/2015

Signature: /s/ Dimitrios Lambritsios
Dimitrios Lambritsios
President